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MEDICAL STANDARDS

For the Agency to fulfill its mission it is necessary that it both have and use effective means of retaining the services only of those employees who are most effective.

To this end there needs to be an efficient and equitable means of ending the services of employees who are not effective.

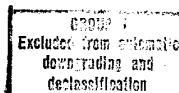
Aside from those who are ineffective because of clear-cut physical or psychiatric disease, there is an important minority who are ineffective because of personality traits, manifesting themselves in actions which are inimical to adequate performance of duty.

These employees show no symptoms of illness, in the proper sense, which are disabling in the long run. They do, however, show clearly an inadaptability to the social and professional requirements laid upon them by the basic demands of the intelligence service.

These employees' adjustment difficulties in the intelligence service stem from deep-seated personality characteristics, which, as a practical matter, are not amenable to change through medical treatment or other rehabilitative measures. Thus, they pose, in a larger sense, medical problems, and so they come properly within the province of the medical-psychiatric department for identification.

To assist the Agency in the accomplishment of its mission, the medical department proposes to advise how the Agency may end the employment of these

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Secretary of Defense.

In this way the rights and protection of the individual are assured under the laws of the land through a formal procedure whose essence is his full and fair hearing, with benefit of legal counsel, before legally con-

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An essential feature of the reviewing medical-administrative boards is that the employee appears in person before them, or has that opportunity, his health permitting, and is there informed of the board's opinions and recommendations, and is afforded the opportunity to submit his statement in rebuttal to the board's findings if he wants to. If he submits a statement in rebuttal, his case is reviewed and/or heard by the next higher reviewing authority.

While the basic democratic, constitutional, and bureaucratic facts of life are common to the military as well as to the intelligence services, there are significant differences between them. Men are drafted for the military. Government service otherwise is voluntary. People are carefully screened and selected in recruitment for the intelligence service, where this is not so in the military draft. Consequently, the severe obvious cases of personality disorders are not employed by the intelligence service.

Nevertheless, cases of personality disorder, manifested by maladjustment on the job and elsewhere are recognizable and identifiable in the Agency. They ordinarily are of superior intelligence, formally well educated, knowledgeable of the ways of the world and of the Agency, and do not have histories of the usual flamboyant inadequacies and delinquencies antedating Government service which characterize the usual case of unsuitability in the military. What does characterize their Agency service is an overall unsatisfactory productiveness on the job, an egocentric manipulation of others, an important tendency to develop or complain of physical symptoms of illness under minor stress, and persistently disagreeable dealings with others. They show a de facto lack of loyalty to others or to the job to be done, and a signal

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disregard for others in the face of immediate self interest. There is frequently a contaminating alcoholism or imprudent use of "medications" with disruptive impact at work, problematic sexual behavior, and other actions bordering upon if not technically constituting security violations. Marital difficulties are notoriously chronic and severe, and disruptive to the job. On psychiatric examination one cannot expect them to be candid, or to acknowledge known facts indicative of personal imperfection. They cast "blame" upon others, talk fast, glibly, and interminably to obscure personal responsibility for any untoward event. They seek refuge in speaking in vague generalities, with the end result that nothing can be clarified. With some years' experience in this kind of one-upsmanship, they can develop considerable skill in diverting attention from discussion of what actually happened to the black box.

The termination of Agency employment of such individuals who are ineffective and disruptive on the job is clearly in the national interest. How it is to be implemented in a fair, reasonable, and effective way is crucially important since inadequate implementation means no implementation.

The termination of employment is a command function. It is not a medical one. The medical function is an advisory one. The medical opinions and recommendations are vitally important, but they are still advisory to the command. The decision and action about employment, however influenced by medical advice, remain command functions.

In this connection, however, it is essential that both the command and the medical authorities present a solid front on what is to be done, and be

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in agreement as to the reasons for it. Neither command nor medical authorities can go it alone.

The premature termination of employment under these circumstances can only be done on the basis of an authority supraordinate to both the medical department and the employee's own office. Only in this way can the employee's office and the medical department feel free to perform their necessary duties in an effective and impartial way.

Another important feature to this employment termination is the protection of the employee's individual rights. Many employees who stand so to be terminated may have many years' services. A man may well be forty-years old, with a family to support, and no particular skills to recommend him to another career or employer. He may well have made financial commitments on the basis of a \$15,000 a year income. It will not do to have him be discharged and become a public charge, or an inviting target for exploitation. It will not do for him to have real cause for embitterment. Effective measures must be implemented to give him ample assistance in becoming a going concern in another line of endeavor.

At the same time it will not do to support him in a passive position for the rest of his life, granting him the same benefits as a valued and effective employee who becomes disabled by injury or disease, or who earns his pension by his length of responsible and valued service.

The military meets this problem by a system of severance pay. A man who has a minimum of eight years service and is then terminated actually because of unsuitability, or for a mild actual illness, receives upon separation

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a lump sum of money amounting to several thousand dollars, upon which he can reasonably expect to live while he prepares himself for earning a living some other way. He is also eligible for a variety of benefits subsidized by the Veterans' Administration.

Analogous arrangements already exist for veterans of the intelligence service, and might be expanded if it were indicated.

#### Disposition by Reason of Unsuitability

This action, medically recommended, is a very serious matter. It affects a man's pride, as well as depriving him of his usual means of livelihood. Affecting, as it does, some employees of several years' service, it can be expected to be hotly contested by some of the employees concerned. They can be expected to seek legal recourse and to retain legal counsel to help defend their rights. It will be imperative that all conceivable safeguards for the individual's rights be incorporated in the assessment and dispositional system. It is imperative that the employee have the benefit of the most experienced and sophisticated psychiatric examination, and to have real assurances of the individual attention to his case of the most senior, impartial and trusted medical, legal, and administrative authorities of the Agency. With these safeguards built into the dispositional system, and with his individual predicament explicitly acknowledged, respected, protected and provided for and with the benefits of full, fair and open hearing of his case, with benefit of legal counsel, it is not likely that an employee will leave Agency employment in such a state of mind that he constitutes a menace to himself or to the national security.

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Procedural Matters in Cases of Unsuitability for Agency Service

Since these cases are psychiatric, and potentially highly controversial from the subjects' standpoints, it would be well for them to be examined by more than one psychiatrist. In this light it would be well for them to be examined by C/PS, as well as by another member of his staff.

In addition, it would be well for these cases, as customarily, to be examined physically by a physician of the Clinical Division.

These three staff physicians could constitute a formal board, with the senior psychiatrist as chairman, and they could prepare a joint report in cases of unsuitability, stating, in cases of unsuitability, the characterological diagnosis in accordance with accepted medical principles and nomenclature, detailing the hard data from the history and current examination to support the diagnosis, and rendering a recommendation for disposition with respect to Agency employment.

In consideration of the principle of subject's full and fair hearing, these three doctors might convene as an appropriately designated group to inform the subject of their considered and concerted opinions and recommendations. Subject could properly be afforded the opportunity before that group to state his acquiescence to their views, or to submit a statement in rebuttal to them.

He could be informed by the Chairman that the group's opinions and recommendations were advisory to higher authority, and were subject to their deliberations, where he could appear in person with benefit of legal counsel, and appeal if

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he chose, to those higher authorities.

His case in any event would be referred to the CRB, and D/MS.

The original examiners' joint report could be passed to the CRB for endorsement by the CRB chairman if that Board approved, and thence to D/MS for endorsement if he approved, and thence through appropriate command channels to the Director of Personnel or other ultimate action authority as designated by the DCI.

In cases of controversy by reason of subject's rebuttals or appeals, a higher board with membership of Director of Medical Services, Director of Personnel, the Inspector General and perhaps the Director of Security or their senior designees could be constituted, before which Subject could appear in person with benefit of legal counsel, for another full and fair hearing. Ultimate action could be referred to the DCI or his appointed designee.

This procedure would parallel the military system, which has proved to be workable and effective.

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METHOD OF REFERRAL

These employees may come to the Medical Department in a variety of ways.

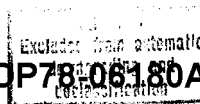
The responsibility and initiative for referral to OMS lies with the command.

In cases where maladjustment is the concern of a component, referral for medical evaluation for fitness or suitability for service should be made by the employee's component. The referral for this kind of evaluation should be accompanied in all cases by a detailed description of the employee's unsatisfactory behavior, detailed in writing by his responsible supervisors and endorsed in writing by the head of the employee's career service.

Vague generalities in this report, such as "poor attitude", "out of phase with management", or "excessive sick leave", unsupported by additional hard data are unacceptable.

Nevertheless, doctors must realize that supervisors may honestly not know ~~that hard data of this sort,~~ or exactly what kind of hard data are required for medical evaluation. Consequently, where hard data is lacking the doctor must consult with the reporting supervisor and explain to him what hard data are required. It usually is necessary to explain to supervisors that psychiatric evaluation, especially in these kinds of cases, depends more on this kind of historical information than it does on the psychiatric interview.

The employee's central personnel file must be forwarded to the responsible examining physicians.





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This kind of collaboration from the administrators should be readily forthcoming if the original referral is made in a responsible way and in good faith.

The traditional referral for Fitness-for-Duty evaluations may properly be implemented, but there needs to be other avenues of referral available also.

The Medical Department shares in the responsibility for the initial identification of cases of unsuitability. Such cases may surface to the Medical Department in the course of medical examinations for overseas assignments, TDYs, returns to duty, self-referrals, division referrals, or security referrals.

Where there is good reason to believe that an employee examined under any of these circumstances may be unsuitable for service, the case should be brought to the attention of C/PS and consideration given to the advisability of alerting both the subject and his responsible supervisors to the condition.

In any such cases, the responsibility for initiating official action about such cases must reside with the responsible supervisor.